CPR-SS 05-01

CANDIDATE'S REPORT OF RECEIPTS AND DISBURSEMENTS



Name of Candidate E. D	AVIS				C	umaign Fin			
Address POST OFFICE #	2083	***	County _		5	cretary of State			
Telephone 601-	786-8309		(Fax) _						
Contact Name		En	nail Address _	vdavis@senate	.ms.gov				
Office Sought District 36			Political Party						
Check here if abov	e is different from pr	evious repo	rt						
TYPE OF REPORT									
An	nual Report	(January	1, 2008 through	gh December 3	31, 2008)	Mandatory			
Winter Control of the		IMPO	RTANT						
Periodic reports are mandator indicating "0" (Zero) for total Until a candidate files a termin	amount of reported contri	ibutions and e	penditures during	this period.					
(b)(ii)and(iii).	adon report, amina ana i	periodic report	o muse sem se mee	in accordance with	iii Pilasi Code	Aiii. \$25-15-607			
3) The appropriate office must be or a holiday, the office must be reports are acceptable. 4) Contributions in excess of \$20 FAX or otherwise within 48 ho	e in actual receipt of the r 0 received after the repor	equired report ting period bu	s by 5:00 p.m. on t t before 12:01 a.m.	he first working da \cdot on the day of the ϵ	y before the d	eadline. Faxed			
1	REPORTED CONTR	RIBUTION	S AND DISBU	JRSEMENTS					
	Itemized	+ N	on - Itemized	This Period	+ Calendar	year-to-date			
Total amount of contributions	\$3,000.00	+	\$200.00	\$3,200.00		\$3,200.00			
Total amount of disbursement	\$0.00	+	\$0.00	\$0.00					
	\$6,680.92								
I certify that I have exa	mined this report and to	the best of my	knowledge and be	elief it is true, accur	ate, and com	plete.			
Electronic S	ignature on file wi	th Mississi	ppi SOS Office	•					
m/m filer				2/2/2009					
(Signature of Candidate)				(Date)					
Authority: Refer to Miss.Code					ine or failuro	to submit valid reports			

Penalties: Failure to submit required reports, or failure to submit reports in accordance with statutory deadline, or failure to submit valid reports shall result in fines of \$50 per day and/or prosecution in accordance with Miss. Code Ann. \$\$ 23-15-811 and 813(1972).

SEND TO: 1. Candidates for statewide, state district, multi-county and all legislative offices should return form to DELBERT HOSEMANN, Secretary of State, 401 Mississippi Street, Jackson, MS 39201 or FAX to 601-359-1499

2. Candidates for countywide or county district offices should return form to their county Circuit Clerk.

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OFFICE USE ONLY

DATE STAMP

Receipt Detail

Contributor	Туре	Source	Date	Amount
MS Bankers Assoc. PAC	Monetary	PAC	01/04/2008	\$2,000.00
MS Health Care Assoc. PAC	Monetary	PAC	01/05/2008	\$250.00
Jerry D. Stogner	Monetary	Individual	10/19/2008	\$500.00
Advance America	Monetary	PAC	11/11/2008	\$250.00
Receipt-Non-Itemized	Monetary		12/05/2008	\$200.00